BEST AVAILABLE COPY

Application or Docket Number

PATENT A	APPLICATION	FEE DETERM	IINATION RECORD
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Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE OF		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS		21				RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	minus 20=		* 1		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS) minus 3 =		* 0		X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
		(Column 1) CLAIMS		(Colui		(Column 3)	O III ALL I) 	V	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T 01	=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM		+140=		OR	+280=	
							TOTAL			TOTAL	
		42.		4.	A.		ADDIT. FEE		Jun	ADDIT. FEE	
		(Column 1)		(Colu	mn 2) HEST	(Column 3)					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	-	OR	X\$18=	
	Independent	*	Minus	***		=	X42=		OR	X84=	
╙	FIRST PRESE	NTATION OF M		+140=		OR	+280=				
							TOTAL		OB	TOTAL	
(Column 1) (Column 2) (Column 3)											
											1
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM				OR		
	If the pains in eater	mn 1 ie lees than t	ho onto in an	umo o uma	o "O" in co	dumn 3	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		mber Previously Pather Previously Pa						propriate ho			